PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Bouillet, Eric
Title	Method for Stochastic Selecti
Group Art Unit	
Examiner Name	
Attorney Docket Number	TEM-03-001

OR	ners at (Customer Number med below:	<u></u> -	Place Customer Number Bar Code Label here				
		Name		Registration Number				
		Jeffery J. Brosemer		36,096				
	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.							
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Number Bar Code Label here								
Firm or Individual Na	ame	Patent Administrator						
Address		Tellium	n, Inc.	· · · · · · · · · · · · · · · · · · ·				
Address		2 Crescent Pla	ice, P	O Box 901				
City		Oceanport	<u>State</u>	NJ Zip 07757-0901				
Country		USA						
Telephone		732-923-4233	Fax	732-728-9862				
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assigned of Record.								
Name	Krishna Bol							
Signature	L	(1) (1) (1)						
Date	June 20, 2003							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of one		ms are submitted.						

PTO/SB/02A (10-00)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if ar	ıy:		A petition has been f	filed for th	is unsigned inventor	
Given Siddheswar		Family Name Chaudhuri				
Inventor's Signature . Chem the	~`				Date 4/17/2003	
Residence: City East Brunswick	State	NJ	Country		Citizenship USA	
Mailing Address		10 🗅	Darren Court			
Mailing Address						
City East Brunswick	State	NJ	ZIP 08816	Country	y USA	
Name of Additional Joint Inventor, if an	y:		A petition has been fil	ed for this	s unsigned inventor	
Given Eric Name			Family Name or Surname		Bouillet	
Inventor's Signature				i	Date 4/17/203	
Residence: City Jersey City	State	NJ	Country USA	\	Citizenship French	
Mailing Address	24 W Hamilton Place Apt 2					
Mailing Address						
Jersey City	State	NJ	ZIP 07302	Country	USA	
Name of Additional Joint Inventor, if ar	ny:		A petition has been file	ed for this	unsigned inventor	
Given Jean-Francois Name			amily Name Surname	Lab	oourdette	
Inventor's Signature addrugelly					Date 4/17/03	
Residence: City New York	State	NY	Country US	SA	Citizenship French	
Mailing Address 225 W. 106th Street, Apt. 8F						
Mailing Address						
City N w York	State	NY	ZIP 10025	Co	untry USA	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>A</u> of <u>3</u>

Name of Additi	ional loint Inventor if an				· · · · · · · · ·			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name	Suryanarayan				Family Name or Surname		Ramamurthy .	
Inventor's Signature	Kanaminty						Date 5 09 03	
Residence: City	Foster City	Sta	te CA		Country	4	Citizenship India	
Mailing Address	Mailing Address 350 Stanchion Lane							
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City_	Foster City	Sta	te CA		ZIP 94404	Count	usa usa	
Name of Additional Joint Inventor, if any:						is unsigned inventor		
Given Family Name Name or Surname								
Inventor's Signature							Date	
Residence: City	ce: City State				Country Citizenship			
Mailing Address								
Mailing Address								
City		Sta	ite		ZIP	Count	ry .	
Name of Additi	onal Joint Inventor, if an	y:	-		A petition has been fil	ed for this	s unsigned inventor	
					Family Name or Surname			
Inventor's Signature Date						Date		
R sidence: City					Country		Citizenship	
Mailing Address								
Mailing Address								
City		State	Ð		ZIP	co	ountry	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of _3

Name of Addit	ional Joint Inventor, if any	y:			A petition has been	filed for t	his unsigned inventor	
Given Name	Georgios				Family Name Ellinas			
Inventor's Signature	CEllina					Date 0 4/22/03		
Residence: City	Astoria	Stat	te NY	C	USA ountry		Citizenship Cyprus	
Mailing Address 21-01 23rd Avenue, Apt. 2								
Mailing Address						·		
City	Astoria	Stat	te NY	\ _z	_{ZIP} 11105	Count	ry USA	
Name of Additi	ional Joint Inventor, if any	y:			A petition has been fil	led for th	is unsigned inventor	
Given Name					Family Name or Surname			
Inventor's Signature			•		Date			
				T,				
	Residence: City State Country Citizenship							
Mailing Address								
Mailing Address		Τ		\neg		 	 	
City		Sta	ite	:	ZIP	Count	ry	
Name of Additional Joint Inventor, if any:								
Given Family Name Name or Surname								
Inventor's						Date		
Residence: City					Country		Citizenship	
Mailing Address								
Mailing Address								
City		Stat	:		ZIP	C	Duntry	

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	METHOD FOR STOCHASTIC SLELCTION OF IMPROVED COST METRIC BACKUP PATHS IN SHARED-MESH PROTECTION NETWORKS					
As the below named inventor(s), I/we declare that:						
This declaration is d	This declaration is directed to:					
	The attached application, or					
	Application No, filed on,					
	as amended on(if applicable);					
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;						
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;						
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.						
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.						
CHILL MANG OF IN	(FAITODA)					
	FULL NAME OF INVENTOR(S) Inventor one: SEE ATTACHED					
	i					
Inventor two: SEE ATTACHED						
Signature:	Citizen of:					
Inventor three: SEE ATTACHED						
Signature:	Citizen of:					
Inventor four: SEE ATTACHED						
	Citizen of:					
Additional inve	ntors or a legal representative are being named on					

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.